DIARRHEA = ≥ 3 loose stools in ≤ 24 hours due to suspected infectious diarrhea and/or different from patient’s baseline stool function

Do NOT Test:  
1. For cure (if toxin protein or gene positive)  
2. <12 months old  
3. If negative C. difficile test within 7 days

Obtain Provider order and send one stool sample for C. difficile testing

Positive result (Toxin Gene OR Protein detected)  
Negative result (Toxin Gene not detected)

Continue Enteric Contact Isolation

Is patient on C6 BMT, 11L or 12L?  
No  
Yes

1.) Is diarrhea absent for 48 hours AND  
2.) Is a clean room available?

Continue Enteric Contact Isolation  
Discontinue Enteric Contact Isolation

Is there concern for infectious diarrhea (ex. Norovirus)?  
No  
Yes

Discontinue laxatives and/or stool softeners and/or optimize tube feeds and observe for ≥ 24 hours. 
Send test earlier if strong clinical suspicion for C. difficile infection

Diarrhea persists?

No  
Yes

Continue Enteric Contact Isolation

Discontinue Enteric Contact Isolation  
Continue Enteric Contact  
*Consider testing for alternative pathogens. Utilize isolation based on pathogen

The Diarrhea Decision Tree does not substitute for clinical assessment and judgment to treat.

*Refer to Isolation Table on HEIP website: http://infectioncontrol.ucsfmedicalcenter.org/

Resources:  
To obtain testing approval for testing a patient <12 months of age:  
• Pediatric ID Pager: 415-443 2384
To obtain approval for testing if performed <7 days from prior test:  
• Microbiology: 415-353-1268
For transmission-based precautions questions:  
• Infection Control: 415-353-4343
For clinical, diagnostic and treatment recommendations for C. difficile and other pathogens, consider Infectious Disease Consultation.

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Do not test and do not isolate

MD or RN orders/initiates Enteric Contact Isolation

Has patient received tube feeds, laxatives, or stool softeners in previous 24 hours?

No  
Yes

1.) Is diarrhea absent for 48 hours AND  
2.) Is a clean room available?

Continue Enteric Contact Isolation  
Discontinue Enteric Contact Isolation

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Hospital Epidemiology and Infection Prevention